

PATENT

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REQUEST FOR REFUND UNDER 37 CFR 1.26

Subsequently, Applicant has paid for the following fees as large entity by mistake.

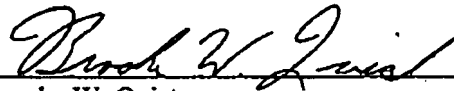
Date	Fee	Paid (\$)	Refund (\$)
06/19/2007	RCE	790	395
06/19/2007	1 mo. extension	120	60
TOTAL		910	455

Should the Examiner have any questions concerning the foregoing, the Examiner is invited to telephone the undersigned attorney at (310) 734-3261.

The undersigned attorney can normally be reached Monday through Friday from about 9:30 AM to 6:00 PM Pacific Time.

Respectfully submitted,

Date: June 19, 2007



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TRANSMITTAL FORM	Application Number	10/668,049
	Filing Date	September 22, 2003
	First Named Inventor	Julie Theel
	Art Unit	3711
	Examiner Name	Hylinski, Alyssa Marie
(to be used for all correspondence after initial filing)		
Total Number of Pages in This Submission	5	Attorney Docket Number 83359.0002

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): REQUEST FOR REFUND UNDER 37 CFR 1.26
<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">Remarks</div>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm	STEPTOE & JOHNSON LLP		
Signature	/Brooke Quist/		
Printed Name	Brooke W. Quist		
Date	June 19, 2007	Reg. No.	45,030

CERTIFICATE OF TRANSMISSION/MAILING			
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